

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000148925

Entity Name: FREEDOM XPRESS INC.

FILED  
Jul 29, 2008  
Secretary of State

## Current Principal Place of Business:

116 NW 107TH TERRACE  
PLANTATION, FL 33324

## New Principal Place of Business:

11630 SW 53RD CT.  
OCALA, FL 34476

## Current Mailing Address:

116 NW 107TH TERRACE  
PLANTATION, FL 33324

## New Mailing Address:

11630 SW 53RD CT.  
OCALA, FL 34476

FEI Number: 22-3948345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HAKANSSOM, THOMAS  
Address: 116 NW 107TH TERRACE  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: HAKANSSOM, ROSARIO  
Address: 116 NW107TH TERRACE  
City-St-Zip: PLANTATION, FL 33324

Title: ST ( ) Delete  
Name: HAKANSSOM, NAOMI  
Address: 116 NW 107TH TERRACE  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HAKANSSOM, NAOMI  
Address: 11630 SW 53RD CT.  
City-St-Zip: OCALA, FL 34476

Title: D (X) Change ( ) Addition  
Name: HAKANSSOM, THOMAS  
Address: 11630 SW 53RD CT.  
City-St-Zip: OCALA, FL 34476

Title: ST (X) Change ( ) Addition  
Name: HAKANSSOM, ROSARIO  
Address: 11630 SW 53RD CT.  
City-St-Zip: OCALA, FL 34476

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NAOMI HAKANSSON

PD

07/29/2008

Electronic Signature of Signing Officer or Director

Date